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#### 67,008-066;S-5534 **Attorney Docket Number DECLARATION FOR UTILITY OR** David A. Kovalsky **DESIGN** First Named Inventor PATENT APPLICATION **COMPLETE IF KNOWN** (37 CFR 1.63) **Application Number** Herewith Herewith Filing Date ☑ Declaration □ Declaration Submitted OR Submitted after Initial Group Art Unit

**Examiner Name** 

Filing (surcharge (37 CFR 1.16 (e)) required)

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I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.							
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.							
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☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:							
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# **DECLARATION** — Utility or Design Patent Application

Direct all correspondence to:	Customer Nu or Bar Code I		026096		OR 0	Correspondence address below
David L. Wisz Name						
Address 400 W. Maple Road						
Address Suite 350						
City Birmingham				State M	Michigan	48009
United States		Telepho	(248)	) 988-836	60	(248) 988-8363 Fax
made are punishable by fine or impriso	I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so validity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INV	/ENTOR:			A petition	n has been file	ed for this unsigned inventor
Given Name (first and middle [if any])					ame KOVALSK	
Inventor's Signature	ey	_				Date
Residence: City Shelton			State CT		U.S.	U.S.
Mailing Address 23 Cathy Drive						
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City Shelton	State CT			ZIP 0648	84	Country U.S.
NAME OF SECOND INVENTOR	J.	<u> </u>		A petition	n has been file	ed for this unsigned inventor
Given Name (first and middle [if any])				Family Nam		
Inventor's Signature Date 5/29/03						
Residence: City Prospect			State CT	С	U.S.	U.S.
Mailing Address 10 Farmwood Drive	<del></del>				-	
Mailing Address						
Prospect	CT State		:	06712 ZIP	.2	Country U.S.
Additional inventors are being named on thesupplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.						

PTO/SB/02C (3-97)

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## **DECLARATION**

#### REGISTERED PRACTITIONER **INFORMATION** (Supplemental Sheet)

		(Supplemental Sneet)			
Name	Registration Number	Name	Registration Number		
Brian A. Collins	33,486				
Matthew P. Pasulka Mony R. Ghose	42,981 38,159				
Theodore W. Olds	33,080				
John E. Carlson	37,794				
David J. Gaskey	37,139				
Kerrie A. Laba William S. Gottschalk	42,777 44,130				
David L. Wisz	46,350				
Karin H. Butchko	45,864				
John M. Siragusa Anthony P. Cho	46,174				
Anna M. Shih	47,209 36,372				
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### **DECLARATION**

**ADDITIONAL INVENTOR(S)** Supplemental Sheet Page 1 of 1

Name of Additional Joint Inventor, if any:     A petition has been filed for this unsigned inventor				this unsigned inventor		
Given Name (first and middle [if any])			Family Name or Surname			
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Inventor's Signature					Date	
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Given Name (first and middle [if any	1)		Family Name or Surname			
Inventor's Signature						
Residence: City	Residence: City State		Country		Citizenship	
Mailing Address						
Mailing Address						
City	State		ZIP		Country	
Name of Additional Joint Inventor, if a						
Given Name (first and middle [if any]	)	一	A petition has been filed for this unsigned inventor			
Family Name or Surname				or Sumame		
Inventor's Signature Date					Date	
Residence: City	State		Country		Citizenship	
Mailing Address						
Mailing Address						
City	State		ZIP	C0	untry	

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